



PTO/66/22 :01-06)
Approved for use through 12/31/2065 0/MB 0651-0005
JS Patoni and Tredomark Office: U.S DEPARTMENT OF COMMERCE

Under the Progressork Reduction Act of 1995, an presons are required to respond to a collection of information unless it disclays a velid OMB control rumb Application Number 9899606 REVOCATION OF POWER OF Filing Date ATTORNEY WITH First Named Inventor **NEW POWER OF ATTORNEY** Art Unit AND Examiner Name CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR 66547 I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with 66547 **Customer Number:** OR Firm or Individual Name Address Çity State Zip Country Telephone Email I am the: Applicant/Inventor Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Fcm PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name ing Yu President of Samsong Electronics Co., Ltd. Date Telephone Nov. NOTE. Signatures of all the inventory or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one 'Tolai of

This collection of information is required by 27 CPR 1.36. The information is required to obtain or retain a boundit by the public which is to the (and by the USPTO to proceed) an apparation. Condemnating is governed by 32 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 include to complete, including gathering, proparing, and supriming the complete application form to the USPTO. Then will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for individuals, about a control the Chert information Officer, U.S. Patient and Trudering Office, U.S. Department of Commerce, I.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO IMS ADDRESS. SEND TO: Commissioner for Potenta, P.O. Box 1450, Alexandria, VA 22313-1450.

if you need assistance in completing the form, cold 1-500-PTO-\$199 and select option 2